I	DATELY ADDI AGAMAN AND							Application or Docket Number					
ı	PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000 096843							1 09/206361					
+	CLAIMS AS FILED - PART'I							ENTIT	7 <u>W</u> 0	OTUE	R THAN	# *** · · ·	
l	(Column 1) (Column 2)						TYPE		0		ENTITY	7	
	TOTAL CLAIMS	45)					RATI	F	EE	RATE	FEE		
FOR		NUMBER FILED A		NUMBER EXTRA		BASIC	EE 35	5.00 O	R BASIC FE	710.00			
TOTAL CHARGERSLE CLAIMS			5 Ominus 20=		. 30		X\$ 9	3	o	R X\$18=	540		
INDEPENDENT CLAIMS 17 m			inus 3 = 14			X40=		0	Váa	1120			
MULTIPLE DEPENDENT CLAIM PRESENT							+135				220		
* If the difference in column 1 is less than zero, enter "O" in column 2								+	0		NII		
I	CLAIMS AS AMENDED - PART II										THAN		
I.	(Column 1) (Column 2) (Column 3)						SMAL	LENT	TY OF		ENTITY		
I	TA	CLAIMS REMAINING AFTER		HIGHE: NUMBE PREVIOU	R	PRESENT	RATE		DI- NAL	RATE	ADDI- TIONAL		
		AMENDMENT		PAID FO		EXTRA	-	FI			FEE	er entere i seco	1.2277.5.31
	Total Independent	018	Minus	" 5	0	8	X\$ 9-		0	X\$18-			
I	Independent FIRST PRESEN	TATION OF M	Minus	SENDENT C		* 4	X40=		or	X80=			
ľ	THOTTMEDEN	TATION OF BIL	ATTIF CE DE	ENDENT	ALAM	لللل	+135-		OF	+270=			
							TOT		OF	TOTAL			
l.	944105	(Column 1)	Er week	(Coluini	2)	(Column 3)	ADDIT, FI	E		ADDIT. FEE		·	
l	Φ	CLAIMS REMAINING		HIGHE!	R	PRESENT		AD			ADDI-		
I	EN	AFTER AMENDMENT		PREVIOU PAID FO		EXTRA	RATE	TIO		RATE	TIONAL FEE		
l	Total Independent	8	Minus	-50	2	= ;	X\$ 9=		OF	X\$18=			
H	Independent -	TATION OF MI	Minus	/ 7	7		X40=		OF	X80=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OF	+270=			
							+135=	<u>.</u>	OF				
ľ	4128106	(Column 1)		(Column	2)	(Column 3)	ADDIT: FE	E L		ADDIT. FEE	<u> </u>		1,000
I		CLAIMS REMAINING		HIGHES	7	PRESENT		ADI	DI-		ADDI-		
ı		AFTER AMENDMENT		PREVIOUS PAID FO	SLY	EXTRA	RATE	TION	VAL	RATE	TIONAL FEE		
	Total .	4	Minus	**			X\$ 9=	1	OR	X\$18=			
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Ľ	FIRST PRESENT	TATION OF MU	LTIPLE DEP	ENDENT C	LAIM		-	┼─	OR				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
and the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter 20." ADDIT. FEE ADDIT. FEE													
The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.													

FORM PTO-675 (Rev. 8/00)

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